

RECEIVED
CENTRAL FAX CENTER

AUG 16 2007

PTO/SB/Z1 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Patent Work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/551,081	
	Filing Date	March 29, 2007	
	First Named Inventor	Qiwang Xu	
	Art Unit	2821	
	Examiner Name		
Total Number of Pages in This Submission	2	Attorney Docket Number	33883-400200

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request to Issue Substitute Filing Receipt
Remarks Please charge any additional fees or credit any overpayment to Deposit Account No. 19-1351.		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	27717 (Seyfarth Shaw LLP)	
Signature		
Printed name	Harold V. Stotland	
Date	August 16, 2007	Reg. No. 24,492

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature		
Typed or printed name	Irene Feizulov	Date 8/16/07

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

RECEIVED
CENTRAL FAX CENTER

AUG 16 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Qiwang Xu et al.

Serial No.: 10/551,081

Filed: March 29, 20067

Title: USE OF N-ACETYL-D-GLUCOSAMINE IN
TREATMENT OF LOCAL LESIONS OR
SYSTEMATIC SYMPTOMS RELATED TO
AUTOIMMUNE REACTIONS

Seyfarth Shaw Matter: 33888-400200

Date: August 16, 2007

Group Art Unit: 2821

Confirmation No. 1679

Customer No. 27717

CERTIFICATION OF FACSIMILE
TRANSMISSIONI hereby certify that, on 8/16/07, this
document is being facsimile transmitted to
the Patent and Trademark Office (571) 273-
8300.
Irene FeizulovDirector of the US Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450REQUEST TO ISSUE SUBSTITUTE FILING RECEIPT

Sir:

Please issue a substitute receipt in which the following change should be made.

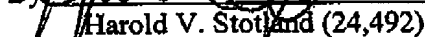
The filing receipt incorrectly lists the title "Use of n-acetyl-d-aminoglycosamine in treatment of local lesions or systematic symptoms related to autoimmune reactions." Please change the word "aminoglycosamine" in the title to --glucosamine--. The title should now read --Use of N-acetyl-D-glucosamine in Treatment of Local Lesions or Systematic Symptoms Related to Autoimmune Reactions--.

Correction is requested.

Respectfully submitted,

Seyfarth Shaw LLP
Attorneys for Applicants
55 E. Monroe Street - Suite 4200
Chicago, Illinois 60603-5803
312-346-8000

By


Harold V. Stotland (24,492)

CHI 11288535.1